

**TOWN OF LISBON**  
**W234 N8676 WOODSIDE RD.**  
**SUSSEX, WI 53089**  
**(262) 246-6100**  
*Rebecca Plotzcher      Treasurer*

**2008 ANNUAL DOG LICENSE INFORMATION**

To obtain a dog license from the Town Hall or by mail follow this procedure:

1. Fill out the license form.
2. Make checks payable to **Town of Lisbon**.
3. **Provide written veterinary proof of rabies vaccination including vaccine manufacturer and serial number, date of vaccination, and expiration date of vaccination. This information will be returned with the license. The rabies tag number is not needed.**
4. Include all of the above items, a self-addressed stamped envelope and the correct fee before mailing.

**DOG LICENSE FEES**  
**MALE OR FEMALE-----\$14.00 or**  
**NEUTERED OR SPAYED-----\$ 9.00**

**A LATE FEE OF EITHER \$14.00 or \$9.00 SHALL BE ASSESSED THE OWNER OF EACH DOG 5 MONTHS OF AGE OR OVER WHO FAILS TO OBTAIN A DOG LICENSE BY MARCH 31, 2008, OR WITHIN 30 DAYS OF ACQUIRING OWNERSHIP OF A LICENSABLE DOG.**

An owner who fails to have a dog vaccinated against rabies as required by state statute 95.21(10) may be required to forfeit not less than \$50.00 nor more than \$100.00

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**2008 Dog License Application**

OWNER'S NAME \_\_\_\_\_

OWNER'S ADDRESS \_\_\_\_\_

CITY, ZIP CODE \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

NAME OF DOG \_\_\_\_\_ COLOR \_\_\_\_\_

BREED \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_  
NEUTERED \_\_\_\_\_ SPAYED \_\_\_\_\_

VACCINE MFG. PLEASE CIRCLE ONE OF THE FOLLOWING OR FILL IN THE NAME NEXT TO OTHER

IMRAB    FORT DODGE    SKB    PFIZER    RHONE MERIEUX    MERIAL    DEFENSOR

OTHER \_\_\_\_\_

SERIAL NUMBER OF THE VACCINE \_\_\_\_\_

DATE OF VACCINATION \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

